

Acupuncture Principles of Kyusho-Jitsu

There are five rules of **kyusho-jitsu** which are based on the principles of acupuncture: 1) Attack along the meridian; 2) Attack **yin and yang**; 3) Attack in accordance with the **diurnal cycle**; 4) Attack in the **cycle of destruction**; 5) The special *points*.

ATTACK ALONG THE MERIDIAN

One of the basic methods of **kyusho-jitsu** is to successively attack points along any particular meridian. Typically, this will begin with points on the extremities, then move along the channel to finish at points on the body or the head. Often, the last point **attacked** is the first or last point on the meridian.

ATTACK YIN AND YANG

As already explained, each meridian is either **yin or yang**, depending on the direction of the energy flow. Since yin and yang are intended to coexist in balance and harmony, it is clear that each yin must have a balancing yang. In acupuncture this balance of yin and yang is quite specific. Of the twelve bi-lateral visceral (organ-related) channels, six are yin and six are yang. And these channels are arranged into six circuits (on each side of the body). The characteristic of these circuits is that one meridian is yin, the other yang, and both meridians are the same element. The circuits might be compared to electrical wiring. There is a positive and a negative wire and both are needed for the electric current to flow. For example energy flows down the inside of the arm to the tip of the little finger in the heart channel, then it flows up from the little finger on the outside of the arm along the small intestine meridian. These circuits are known in healing as the feng-shu relationship.

YIN ORGANS		YANG ORGANS
Lung	—	Large Intestine
Spleen	—	Stomach
Heart	—	Small Intestine
Kidney	—	Bladder
Pericardium	—	Triple Warmer
Liver	—	Gall Bladder

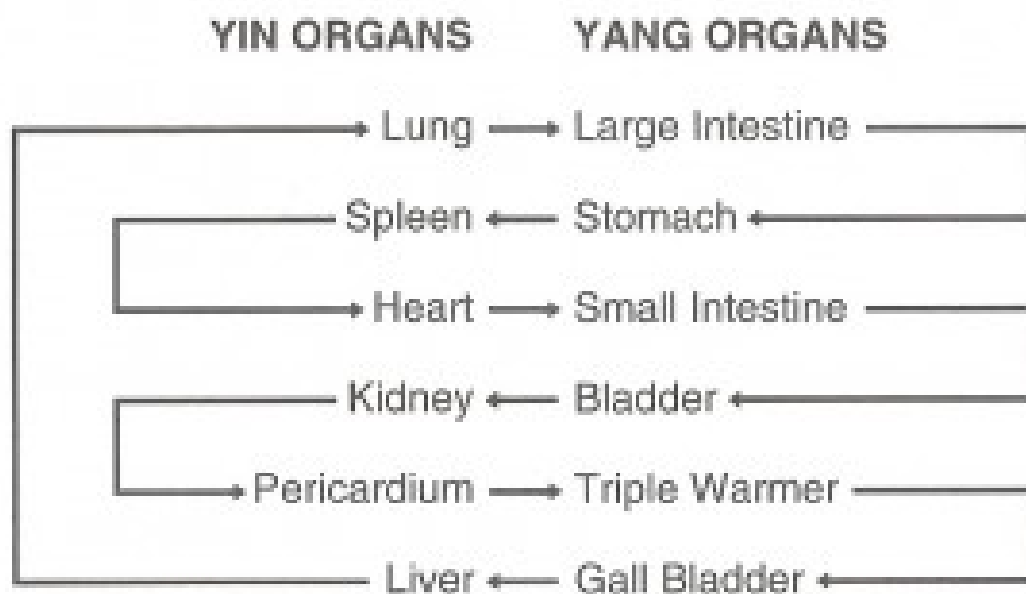
The meridian relations are shown in a chart above. In **kyusho-jitsu**, this circuit can be used in ways similar to the rule of the meridians. Rather than **striking** along one meridian, it is possible to use two meridians in a circuit. **Striking** along the lung channel effects the large intestine line, and vice-versa. For example, a joint lock against the index finger affects the large intestine (yang) meridian. The lung is the corresponding yin organ.

Therefore, while locking the index finger **attack** with a **punch** to L-1, the first point on the lung channel.

Attacking yin and yang can also be understood in a more general manner. The front of the body can be designated as yin, the back as yang. The left side is yin, the right yang. The top half is yin, the bottom half is yang. This means that **pressure point techniques** which cross the body-front to back, side to side, top to bottom, or diagonally, as in right upper back to left lower front- are applying the yin/yang principle.

ATTACK IN ACCORDANCE WITH THE DIURNAL CYCLE

As ki flows through the body it follows a twenty four hour (**diurnal**) cycle through all twelve of the visceral meridians. The succession of ki flow is as follows. (see pic)

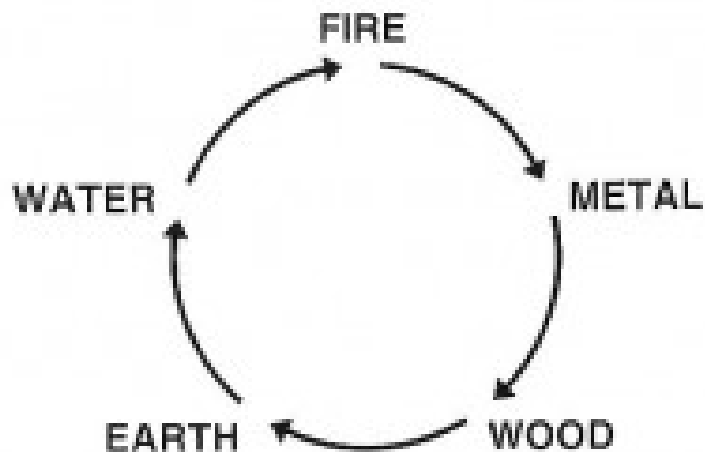


This has two implications for **kyusho-jitsu**: point sequence and time of day **attacking**. The lung and the large intestine form **ayin/yang** circuit. The daily flow of ki, moves from lung, to large intestine, then to stomach. This means that it is possible to move from large intestine to either lung (yin/yang) or stomach (diurnal cycle) when performing techniques. For example, when an opponent grabs your lapels, a strike against LI-10 will bring his head forward in such a manner that the point S-5 along the jaw becomes vulnerable. This occurs in accord with the twenty four hour cycle. In very advanced **kyusho-jitsu**, this principle is used exactly. Each meridian is particularly vulnerable for two hours in twenty four. By **attacking** a meridian during its active time, **techniques** have a magnified effect. But by attacking a particular meridian during its weakest stage of activity it is possible to create a result which won't be felt until the meridian enters its strong period twelve hours later. This is a form of delayed pressure point fighting.

ATTACK IN THE CYCLE OF DESTRUCTION

The twelve bi-lateral meridians are each assigned one of five elements. In the Chinese cosmology, each element is responsible for generating another element to form a complete cycle. Likewise, each element destroys another element in cycle. This principle has been used by acupuncturists for centuries. If, for example, the problem exists along the lung meridian, the acupuncturist might stimulate the stomach or spleen meridian, because "earth" stimulates and benefits "metal." Likewise, if a problem manifests itself on the lung meridian, the acupuncturist may diagnose a problem on the heart meridian, since heart is "fire", which destroys "metal".

CYCLE OF DESTRUCTION



A method for remembering the cycle of creation is to state in these terms: FIRE generates EARTH (think of the dirty ashes of a camp fire); EARTH generates METAL (visualize iron "clinkers" found in the cold ashes of a fire);

METAL generates WATER (think of condensation on a metal container); WATER generates WOOD (visualize rain in a forest, or sap dripping from a tree); WOOD generates FIRE (think of burning logs in a camp fire).

A good device for remembering the cycle of destruction is to remember it in this fashion: FIRE melts METAL; METAL cuts WOOD; WOOD (as in a tree's roots) penetrates the EARTH; EARTH (as in the bank of a river, or an earthen dam) obstructs WATER; and WATER quenches FIRE.

For purposes of combat, follow the **cycle of destruction**. For example, a **strike** to the inguinal crease point cluster **strikes** two **points**, Sp-12 and Li-12. Spleen has the elemental value earth and liver has the elemental value wood. Wood penetrates earth, this is one step in the cycle of destruction. As a result of **striking** this target, the opponent will double over, but his face will remain upright. Exactly at the bend of his neck is the **point** B-10. Bladder has the elemental value water, and earth obstructs water. By striking B-10, a second step in the cycle of destruction is achieved, and the opponent is knocked unconscious. (CAUTION; this is a serious technique which should not actually be performed but only indicated in practice.) There are certain places in kata which sequentially attack points through one complete cycle of destruction. These techniques are considered lethal.

THE SPECIAL POINTS

In addition to these rules for pressure point fighting, the serious practitioner also needs to understand the special points. There are two main sets of special points these are called mu, or "alarm" points and shu, or "associated" points. Alarm points lie (mostly) on the front of the torso. There is an alarm point for each of the twelve organs. They are used diagnostically because they become tender when there is a problem with the corresponding organ.

MERIDIAN	ALARM POINT	ASSOCIATED POINT
LUNG	L-1	B-13
LARGE INTESTINE	S-25	B-25
STOMACH	Co-12	B-21
SPLEEN	LI-13	B-20
HEART	Co-14	B-15
SMALL INTESTINE	Co-4	B-27
BLADDER	Co-3	B-28
KIDNEY	GB-25	B-23
PERICARDIUM	Co-17	B-14
TRIPLE WARMER	Co-5	B-22
GALL BLADDER	GB-24	B-19
LIVER	LI-14	B-18

The associated **points** are all found on the back, along the Bladder meridian. Like the alarm points, there is an associated **point** for each organ. In kyusho-jitsu, the alarm and associated **points** function in conjunction with the related meridians.

There are other special purpose points. In particular are the intersection points (places where meridians "communicate" with each other) which are useful in yin and yang strikes.

The task in kata interpretation is determining what combination of points to use to create an effective application for each technique. The four acupuncture based rules of kyusho-jitsu are important keys to unlocking

kata's hidden secrets. In analyzing kata, the initial action of the movement will often suggest a particular point as a starting place. The subsequent action can then be interpreted using the four rules. Kata movements seem to **attack** again on the same meridian? Does it indicate an **attack** to the corresponding yin or yang meridian? Does it seem to follow the 24 hour cycle? Does it fit the cycle of destruction?" Additionally, one should watch for the use of any special points.

Also bear in mind that a technique may touch several principles at once. Attacking lung then large intestine combines yin and yang with the diurnal cycle, since the ki flows from lung [yin] to large intestine [yang].

Experience shows that, not only are kata organized in a manner consistent with these principles, but, in application, the reactions of the opponent's body actually fit the kata movements. Time and time again we find that **striking** one point will automatically expose one or more follow-up **points** in accordance with one or more of these concepts.

Taken from "Advanced Pressure Point Fighting of Ryukyu Kempo" by George Dillman with Chris Thomas. Pages 46, 50, 52, 54, 56, 58-59 and Dillman Karate International "Advanced Pressure Point Grappling" by George Dillman with Chris Thomas. Page 40 and Dillman Karate International

Principles of Kata Interpretation

1. NO BLOCKS RULE

Simply put, the movements of **Kata** are not defensive. There are no downward blocks or rising blocks at all. Blocking is a completely natural action requiring relatively minimal training to attain a good level of skill. But this is something that every **martial artist** already knows. In free **sparring** blocks occur naturally and without conforming to any particular technique. What is really needed to learn blocking is a partner to feed the attacks. But since **Kata** is a solo exercise it is a waste of time to practice blocking the air.

The movements called blocks in **Kata** don't work as blocks anyway. These actions are totally useless - until they are interpreted as offensive actions. Suddenly a technique that didn't work as a block works as an attack to pressure points.

If an opponent **punches**, that **punch** must be addressed. And the **Kata** movements do indicate how that **punch** is to be handled. However, what **Kata** shows is definately not how to block. Rather, it shows which **pressure points** on the attacking arm or leg are to be struck, touched, or grabbed in order to paralyze the limb and/or to set up **pressure points** on the body or head.

2. PRESSURE POINT RULE

Every **kata** technique is a **pressure point** technique. This means that the number one interpretive question on the mind of any student should be: What **pressure points** am I using with this movement? This is not to say that it is impossible to develop some very effective techniques without using **kyusho-jitsu** principles. But, only pressure point applications can fully and satisfactorily explain the many nuances of **kata** movements.

There are hundreds of **pressure points**, each with its own angle and direction for activation. **Kata** is, quite truthfully, the only way to remember them all. By linking a mental picture of the exact **pressure point** application with the physical movement of the **kata**, the mind and body are literally programmed to respond instantly and effectively.

However, it is not necessary to know all the **pressure points** and to use them in every **kata** technique. Whatever **pressure points** a person knows are the **pressure points** that person should use. While a complete understanding of the *naihanchi kata* series, for example, requires familiarity with over 100 acu-points, a meaningful working knowledge of the **kata** is possible with far fewer.

3. TWO HAND RULE

Simply put, there is no wasted or useless part of a **kata** movement. Every part of the action is there for a reason. There is no hand at the hip in a ready position. There is no rear hand moving in the opposite direction to add power to a technique. Both hands in the **kata** action move because both hands are combative in function. Usually, the rear hand or withdrawing hand is grasping the opponents arm or wrist on **pressure points** which activate the points that the forward hand is striking.

The majority of *kata* techniques have a set position when one hand is drawn or coiled back, before moving forward. This action is usually interpreted as merely a preparatory movement. But, the truth is, this preparatory movement is actually an attack. Many **pressure points** can only be struck from back to front, and the setting action maps out those points. When the opponent grabs and threatens, he is immediately attacked with the set position so that the fight is finished before the first technique is even completed.

Not only do both hands work combatively, but the legs also have an important function. The type of stance used in the execution of a movement affects the direction in which energy is put into the opponents body. For example, a **horse stance** directs energy downward, or to the side; while a **front stance** beams energy down and forward; and a cross-over stance projects energy beyond the line of the opponents body.

The legs and feet are also used to step on, rub against, trap or bump **pressure points** on the opponents legs. These subtle leg attacks activate points on the body, while also destroying his balance. It is even possible to knock an opponent unconscious using only the action of a basic **kata** step. The use of the legs in this manner is very advanced, since it

requires coordination and sensitivity. Nonetheless, in interpreting a **kata** movement one should be asking, what is the purpose of this footwork?

4. MULTIPLE INTERPRETATION RULE

It is sometimes tempting to ask, what is the meaning of a certain **kata** move, but the truth is that there are several interpretations. Some say that there should be 100 applications for each technique, others say five. Realistically, one should have at least three. These three are categorized differently by different people. Some say that they should be release techniques against simple grabs, responses to **punches** or **kicks**, and **defenses** against **weapon** attacks. In our system of **ryukyu kempo**, we increase the seriousness of the response, starting with joint manipulation (*tuitewaza*) to control, moving to more serious knock-out techniques to immobilize, and finally to killing or crippling applications.

5. DIRECTION OF MOVEMENT RULE

Kata, as everyone knows, moves in a variety of directions. Most students have been told that the direction of movements represents the direction from which various attacks are coming. Nothing could be further from the truth. **Kata** does not represent fighting against many attackers who come from different directions. Instead, it represents methods of defending against a variety of attacks, which are delivered mostly from the front. The direction of movement in the **kata** indicates the angle which the defender assumes in relation to the attacker to insure successful application of the technique. For example, a movement to the side means the defender must turn sideways to the attacker while executing the technique; a diagonal step means that the defender must move to the attackers diagonal to make the technique work 100%.

6. VISUALIZATION RULE

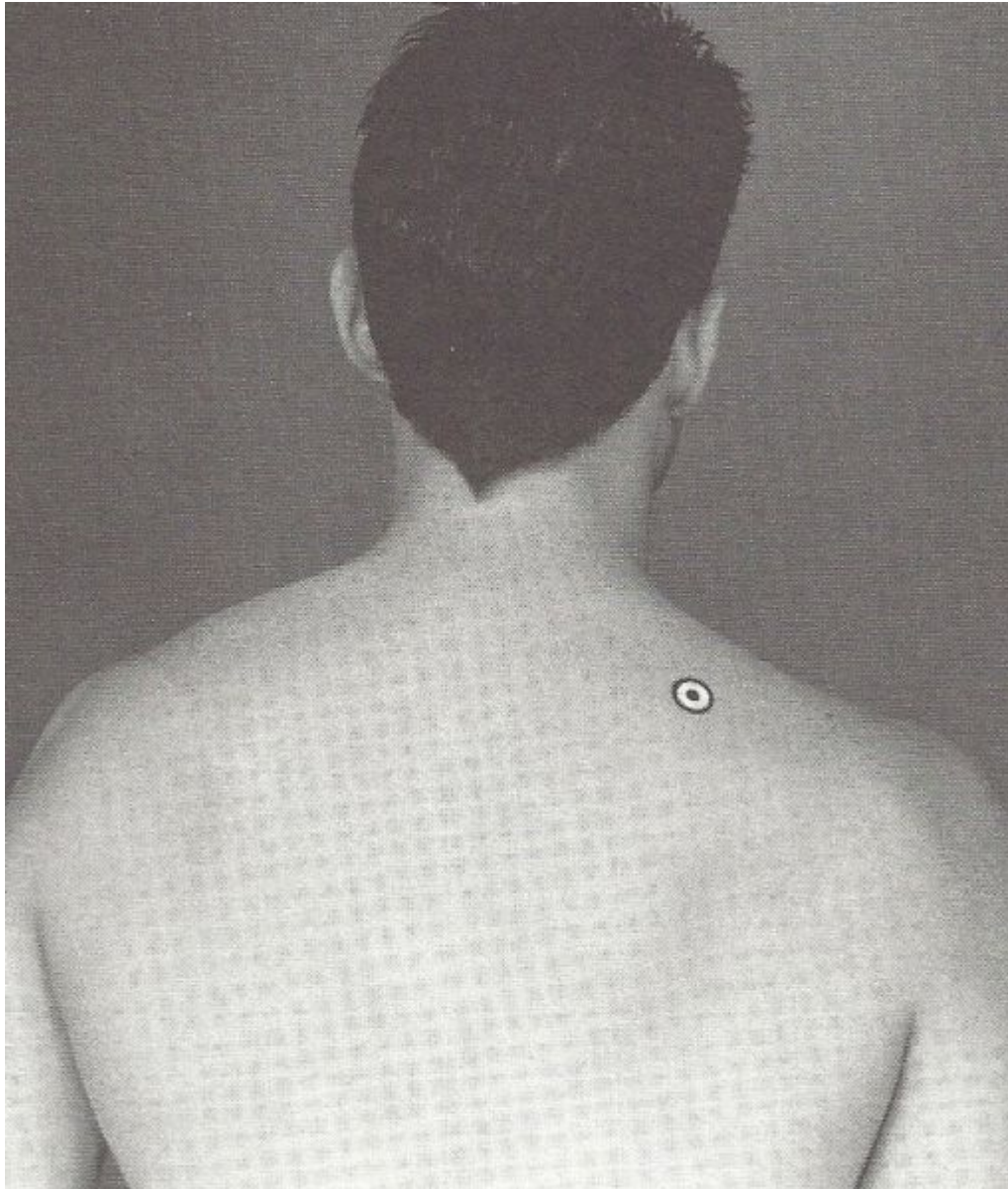
An old piece of wisdom handed down from the masters of old, which never made sense, is this: when performing kata, always visualize the opponent. But, what good did it do to visualize an opponent when the interpretations of the **kata** movements were so completely useless? With proper understanding

of the **kata**, visualization not only makes sense, it is absolutely essential. **Kata** is not principally a physical exercise - it is, overall, a mental one. Through the process of visualizing the exact location of **pressure points**, and properly activating them (including angle and direction) the mind is trained to instantly and accurately respond. The physical actions of the **kata** close the loop, uniting mind and body, and in the process ingrain real combat skills.

It is also important to work with a partner, practicing the various applications. This allows one to get a tactile sense of how it feels to apply a technique, and this adds to the visualization process. Obviously, working with a partner is a good method of insuring that the applications will really work. You should have proper supervision, consult a physician, and use restraint. However, we have found that by visualization alone we are able to develop and use new techniques effectively the first time we try them on someone. The old masters were right when they insisted that **kata** training - proper and complete **kata** training - was all that was necessary.

* "Advanced Pressure Point Fighting of Ryukyu Kempo" by **George Dillman** with Chris Thomas. Pages 29, 30, 31 and **Dillman Karate International**

Points of the Back



TRIPLE WARMER # 15: TW-15

LOCATION: Superior to the scapula, in the center of the supraclavicular fossa. This **point** can be found level with the tip of the shoulder and midway towards the spine.

ANATOMY: The spinal accessory nerve and the supraclavicular nerve.

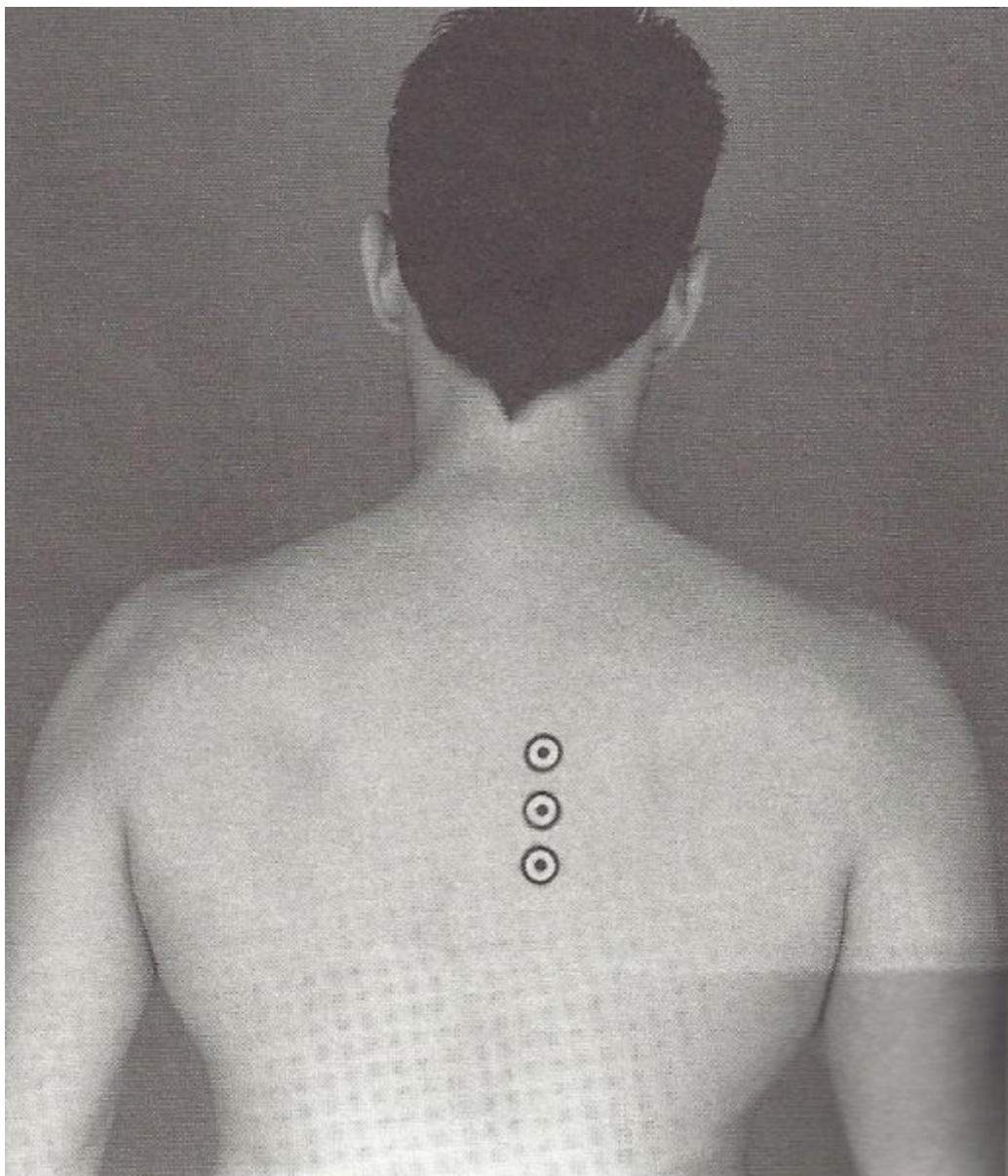
METHOD: Strike this point diagonally downward. It also will respond to thumb pressure.

INTERSCAPULAR-PARASPINAL CLUSTER

Between the spine and the shoulder blades are three important **points** which control the circulatory and respiratory systems. These points can be **attacked** to produce serious consequences.

WARNING:

Because these points are related to the circulatory system, they should only be indicated during practice.



BLADDER # 13: B-13

LOCATION: In the trapezius and rhomboid muscles, 1.5 inches lateral to the lower edge of the spinous process of the third thoracic vertebra (T-3). It is found between the shoulder-blade and the spine.

ANATOMY: A medial branch of the dorsal ramus of the third thoracic spinal nerve.

NOTE: This is the associated point of the lung meridian.

BLADDER # 14: B-14

LOCATION: In the trapezius and rhomboid muscles, 1.5 inches lateral to the lower edge of the spinous process of the fourth thoracic vertebra (T-4). It is found between the shoulder-blade and the spine, 1 inch below B-13.

ANATOMY: Directly on a medial cutaneous branch of the dorsal ramus of the fourth thoracic spinal nerve.

NOTE: This is the associated **point** of the pericardium meridian.

BLADDER # 15: B-15

LOCATION: In the trapezius and rhomboid muscles, 1.5 inches lateral to the lower edge of the spinous process of the fifth thoracic vertebra (T-5). It is found between the shoulder-blade and the spine, 1 inch below B-14.

ANATOMY: A medial branch of the dorsal ramus of the fifth thoracic spinal nerve.

NOTE: This is the associated **point** of the heart meridian.

METHOD: **Strike** these **points** from back to front.

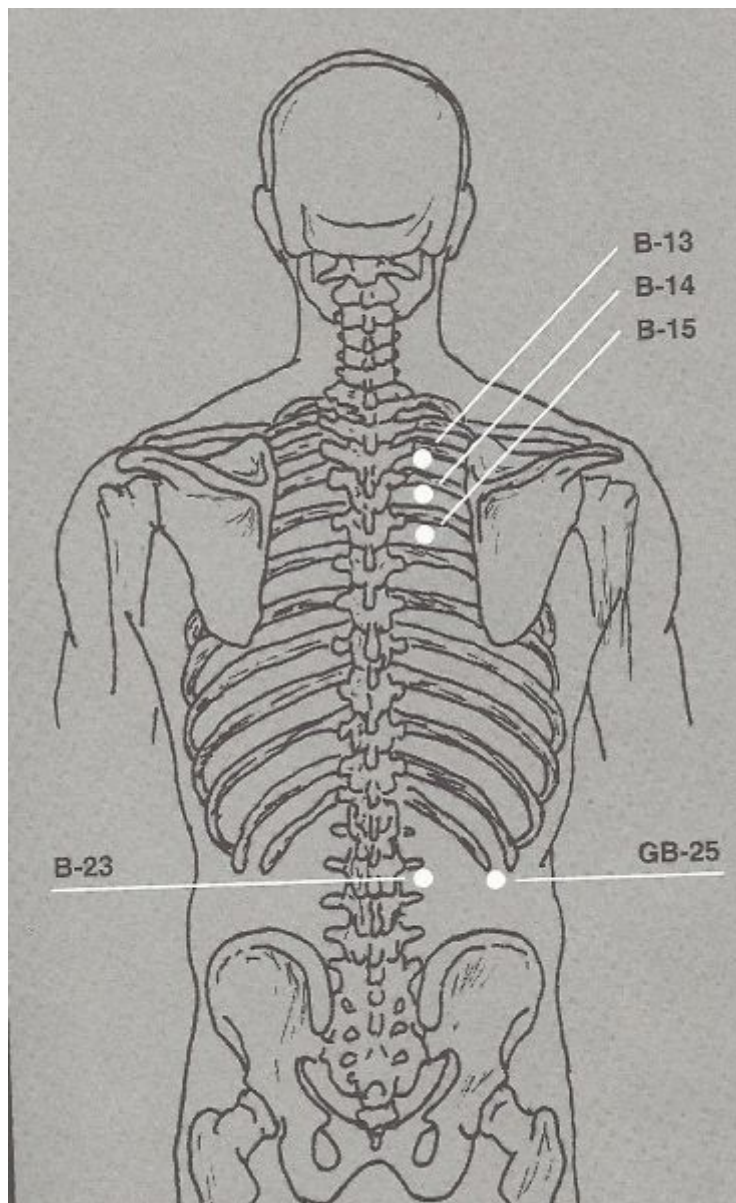
WARNING:

Because these points are related to the circulatory system, they should only be indicated during practice.

POSTERIOR KIDNEY POINT CLUSTER

CAUTION:

Do not strike these points!



BLADDER # 23: B-23

LOCATION: In the lumbodorsal fascia, between the longissimus and iliocostalis muscles, 1.5 inches lateral to the lower end of the spinous process of the 2nd lumbar vertebra (L-2). This point is beside the spine, level with the free end of the twelfth (floating) rib.

ANATOMY: Branches of the first lumbar spinal nerve.

NOTE: This **point** is the associated point of the kidney meridian.

GALL BLADDER # 25: GB-25

LOCATION: At the inferior border of the free end of the twelfth (floating) rib. This point is just at the tip of the smaller of the two floating ribs.

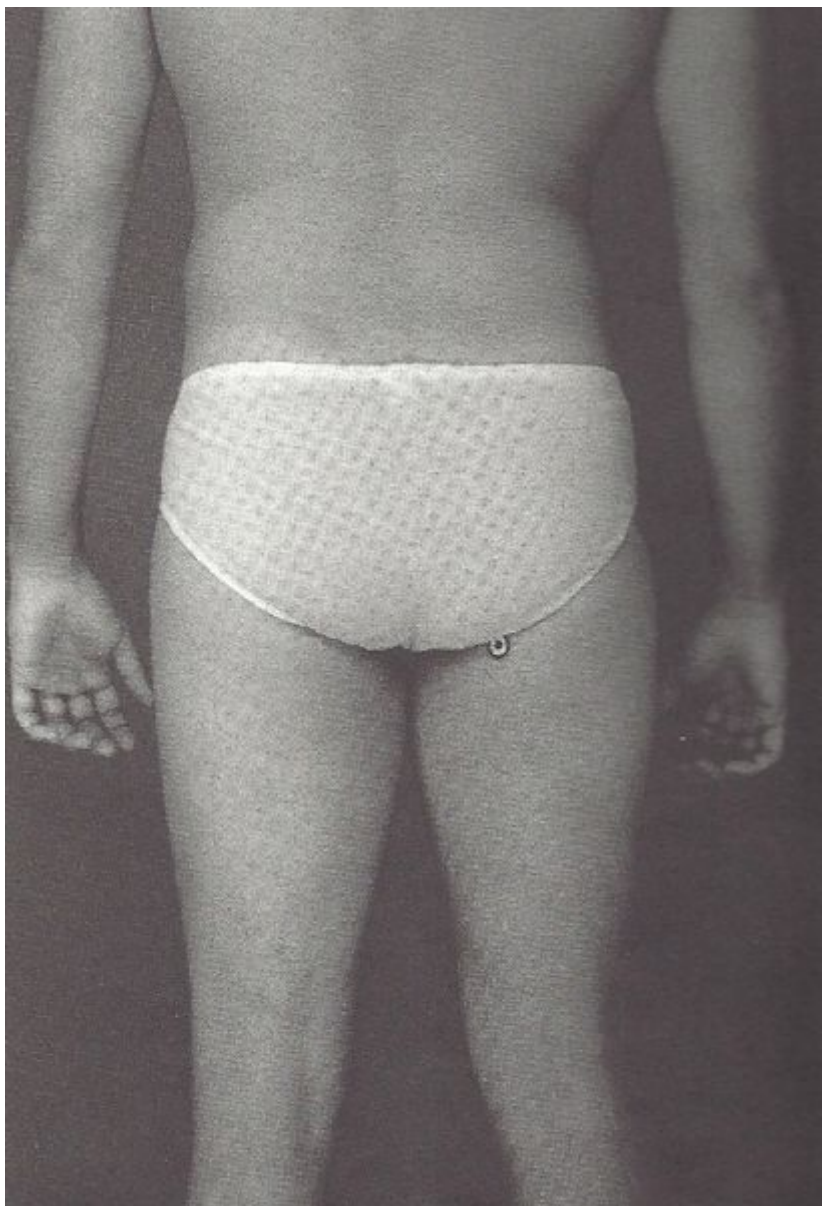
ANATOMY: The 11th intercostal nerve.

NOTE: GB-25 is the alarm point of the kidney meridian.

CAUTION:

Do not strike these points!

BLADDER #50: B-50



LOCATION: At the inferior margin of the gluteus maximus muscle, at the midpoint of the transverse crease. this **point** can be found at the back of the thigh just below the buttocks.

ANATOMY: The posterior cutaneous nerve of the thigh and the sciatic nerve.

METHOD: **Kick** this point to immobilize the leg.

*Taken from THE DILLMAN METHOD OF PRESSURE POINT FIGHTING
by **George A. Dillman** with Chris Thomas (pp.134-137) and **Dillman Karate International**

Points of the Lower Extremities

LIVER #12: LI-12

LOCATION: Level with the pubic symphysis, 2.5 inches either side of the centerline, in the inguinal groove. It is located in the crease found at the border of the upper thigh and the hips.



ANATOMY: The ilioinguinal nerve, and the anterior branch of the obturator nerve.

SPLEEN# 12: SP-12

LOCATION: Level with the upper border of the pubic symphysis, 3.5 inches lateral to the centerline, in the crease of the leg. It is located just at the outside edge of the femoral artery.

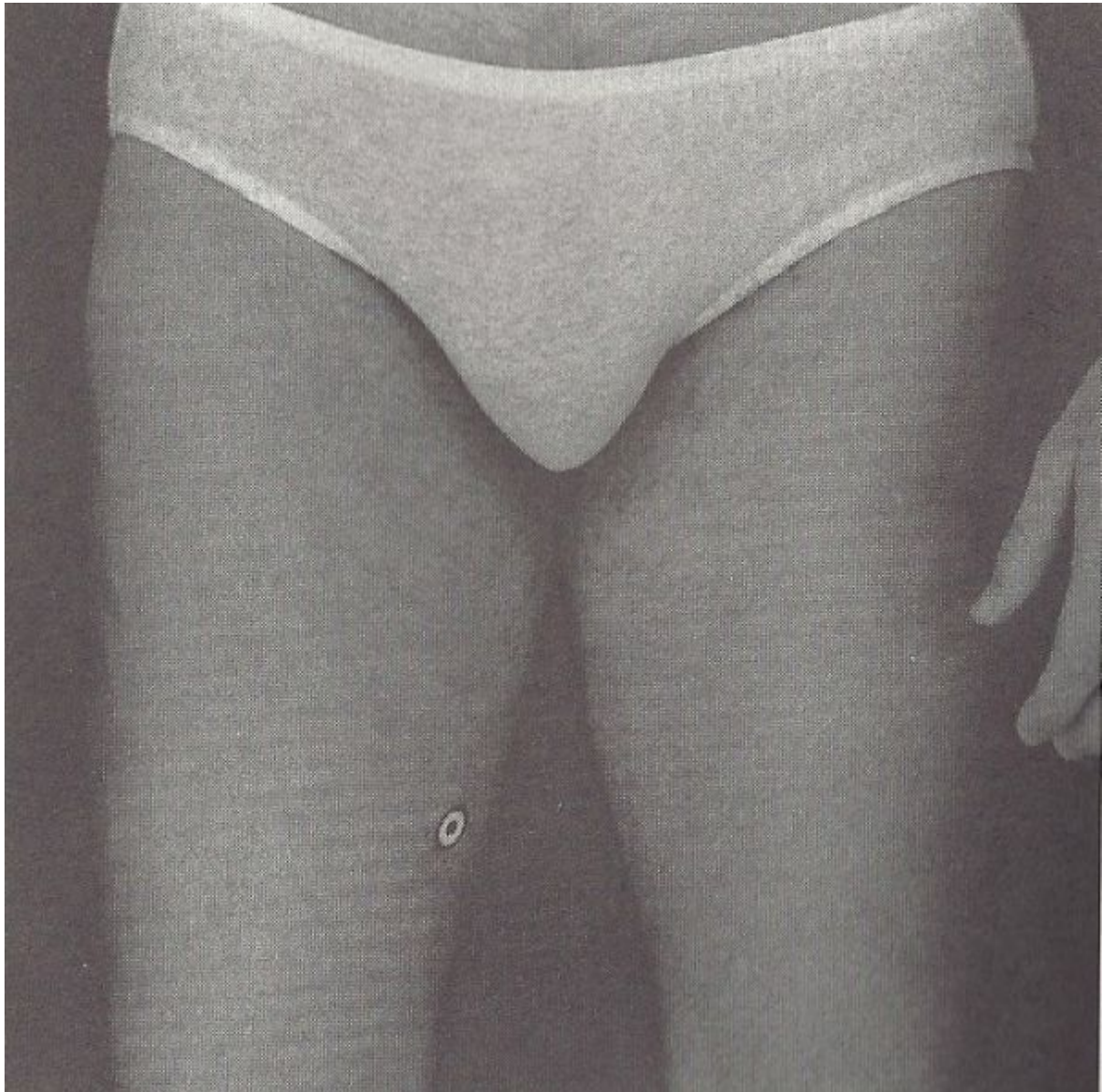
ANATOMY: The point at which the femoral nerve traverses.

METHOD: Strike these points diagonally downward, on a path that moves slightly outward. Attacks to this area will cause an opponent to bend over, and expose points on the back of the head to **attack**.

SPLEEN #11: SP-11

LOCATION: Posterior to the sartorius muscle, on the medial aspect of the thigh, about midway between the knee-joint and the groin. This *point* is located in the middle of the inner thigh.

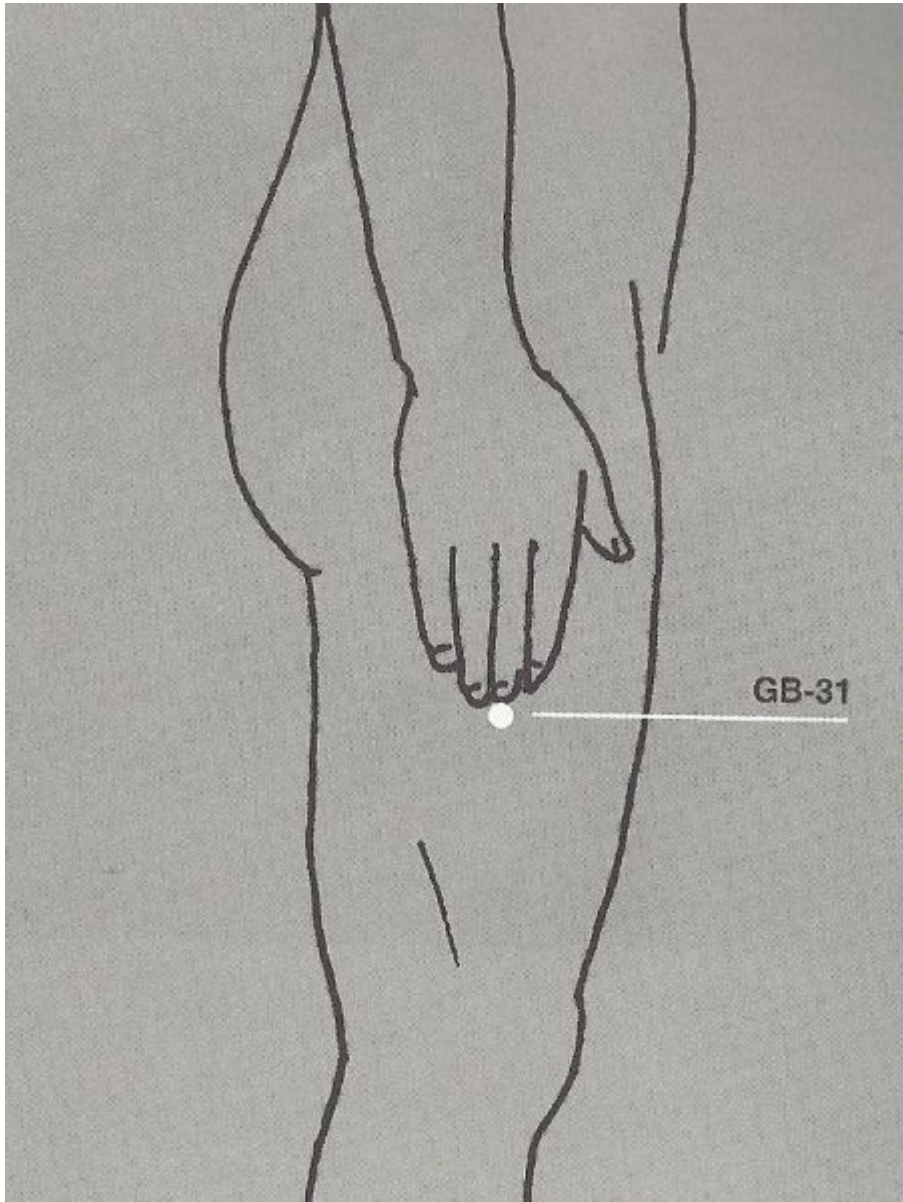
ANATOMY: The anterior femoral cutaneous nerve and the saphenous nerve.



METHOD: **Strike** this point to buckle the leg and knock an opponent to the ground.

NOTE: Typically, this **point** is **struck** with a toe-tip **kick**(tsumasaki-geri). A story told about **karate master** Arakaki Ankichi illustrates the use of this **technique**. Apparently Arakaki's brother once bet him that he could take one of the master's **kicks**. Arakakai, using his toe-tip, **kicked** his brother in the thigh. The brother became sick with a fever and a few days later required surgery on his thigh. Though the story does not indicate which vital point Arakaki attacked, Sp-11 is likely the one.

GALL BLADDER # 31: GB-31



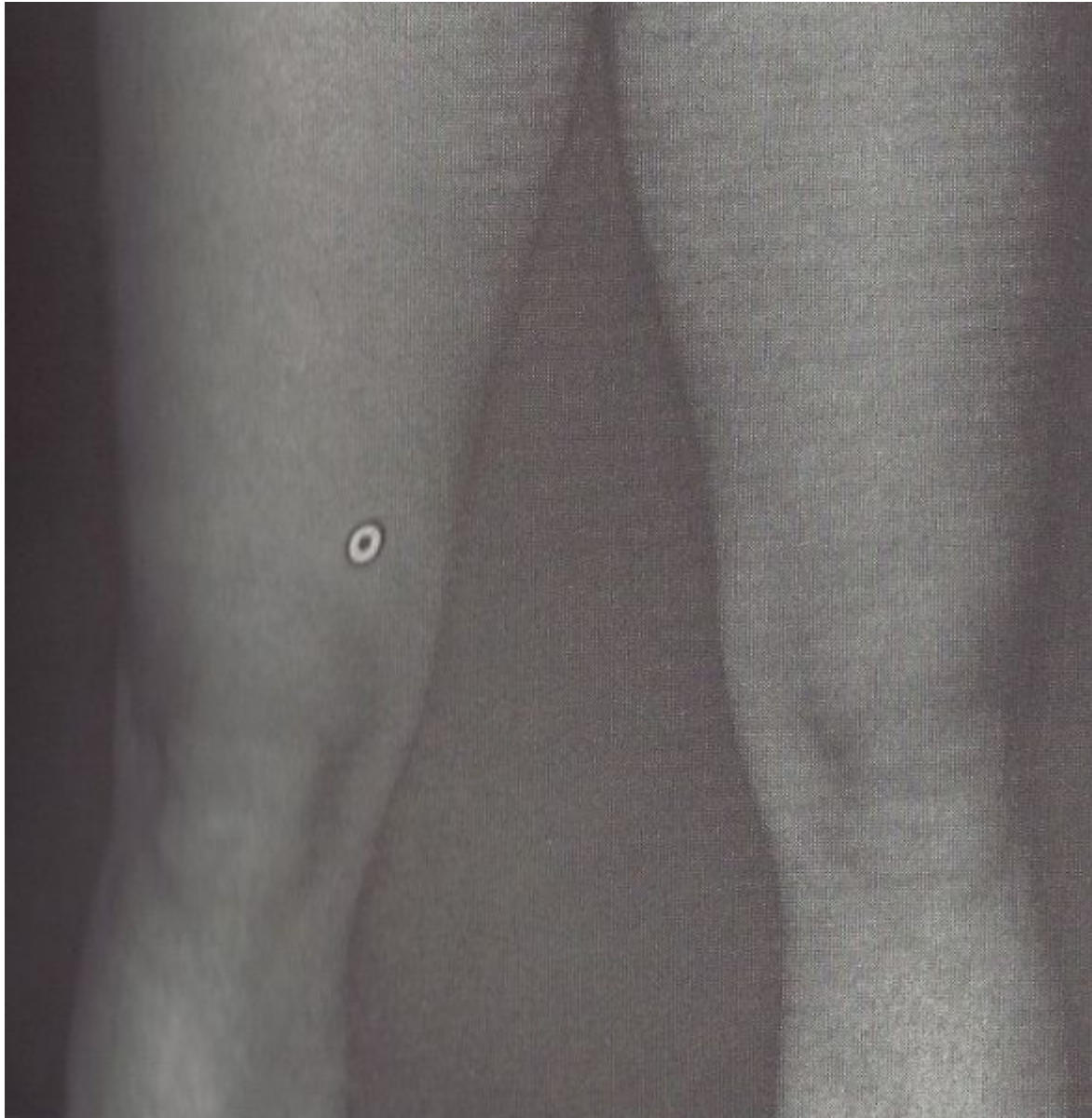
LOCATION: Beneath the tensor fasciae latae, in the vastus lateralis muscle, at the median line of the lateral aspect of the thigh, 7 inches above the knee. This can be found by standing upright with the arm extended along the side of the leg. GB-31 will be just at the tip of the middle finger.

ANATOMY: The lateral cutaneous nerve of the thigh, and a muscular branch of the femoral nerve.

METHOD: **Strike** this **point** from the side.

NOTE: This is a motor-nerve **point**, and the favorite target of the Muay Thai shin kick. Children often knee this point on each other while calling out, "charlie horse."

SPLEEN #10: SP-10

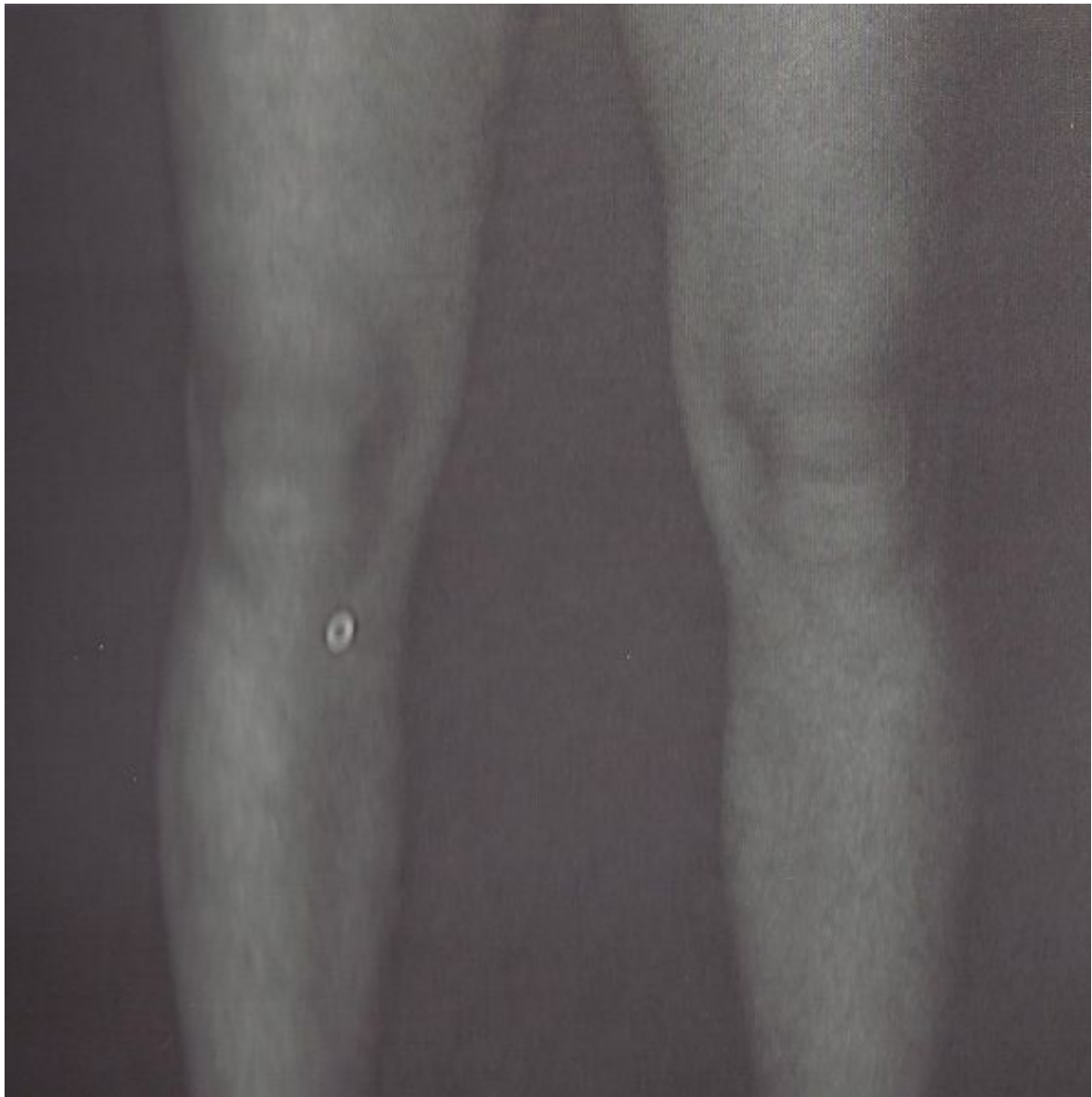


LOCATION: At the superior margin of the medial condyle of the femur, in the medial margin of the vastus medialis muscle. This point is on the inner aspect of the leg, about 3 inches above the level of the knee-cap.

ANATOMY: The anterior femoral cutaneous nerve, and a muscular branch of the femoral nerve.

METHOD: **Strike** diagonally downward following an imaginary line through the center of the knee to dislocate the joint and/or knock the opponent to the ground.

SPLEEN #9: SP-9

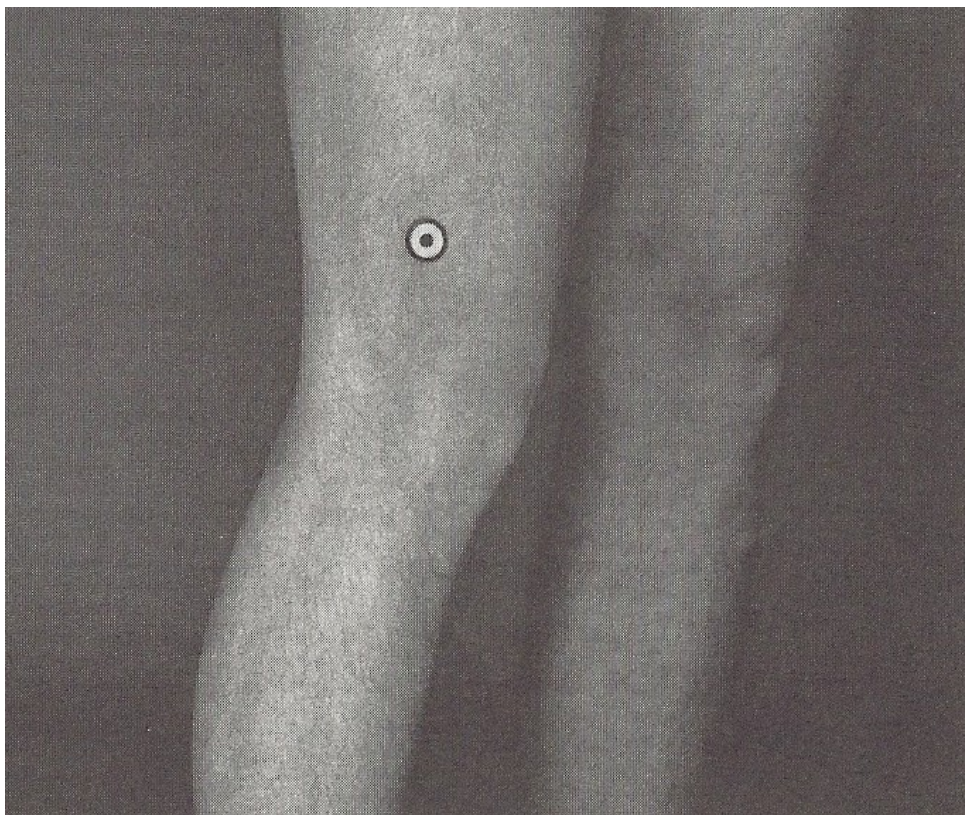


LOCATION: In the depression between the posterior margin of the tibia and the gastrocnemius muscle, at the origin of the soleus. This **point** is on the inner aspect of the knee about 2 inches below the knee-cap.

ANATOMY: A cutaneous branch of the saphenous nerve, and the tibial nerve.

METHOD: **Strike** diagonally upward on a line through the center of the knee to dislocate the joint and/or knock the opponent to the ground.

STOMACH #34: S-34

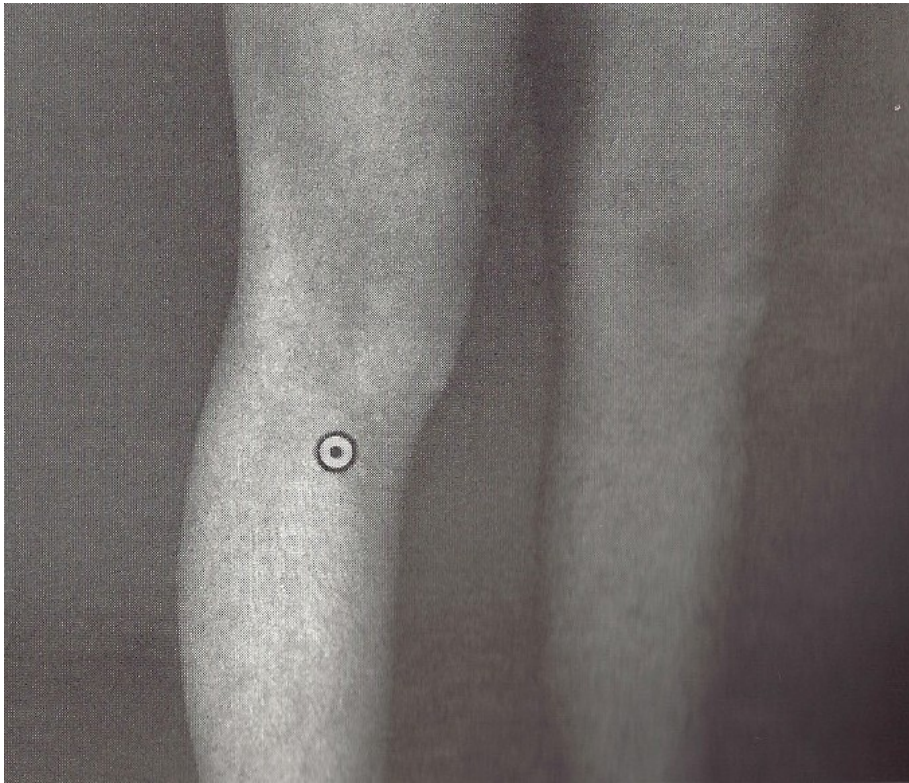


LOCATION: On the lateral aspect of the thigh in the vastus lateralis muscle, at the border of the vastus medialis muscle. This point is about 3 inches above the knee-cap on the outside of the thigh.

ANATOMY: This **point** is situated directly on the lateral femoral cutaneous nerve.

METHOD: **Strike** diagonally downward on a line through the center of the knee to dislocate the joint and/or knock the opponent to the ground.

N-LE-7



LOCATION: About 3 inches below the knee lateral to the tibia in the tibialis anterior muscle.

ANATOMY: The lateral cutaneous nerve of the calf, a cutaneous branch of the saphenous nerve and the deep peroneal nerve.

METHOD: **Strike** this **point** diagonally upward through the center of the knee to dislocate the joint and / or knock the opponent to the ground.

NOTE ON FOUR KNEE POINTS: When **striking** with a very small surface (such as a knuckle) accurate placement is essential in order to effortlessly use these **points** to knock an opponent down. However, when **kicking**, a shorthand method can be used for locating them: Simply envision an "X" drawn across the knee, and **attack** the ends of the "X" on an imaginary line which passes through the center of the joint.

SPLEEN #6: SP-6



LOCATION: Between the posterior margin of the tibia and the soleus muscle, 3 inches above the medial malleolus of the ankle. It is on the inside of the leg, just along the rear edge of the bone (tibia) about midway between the prominence of the ankle and the lower edge of the calf muscle.

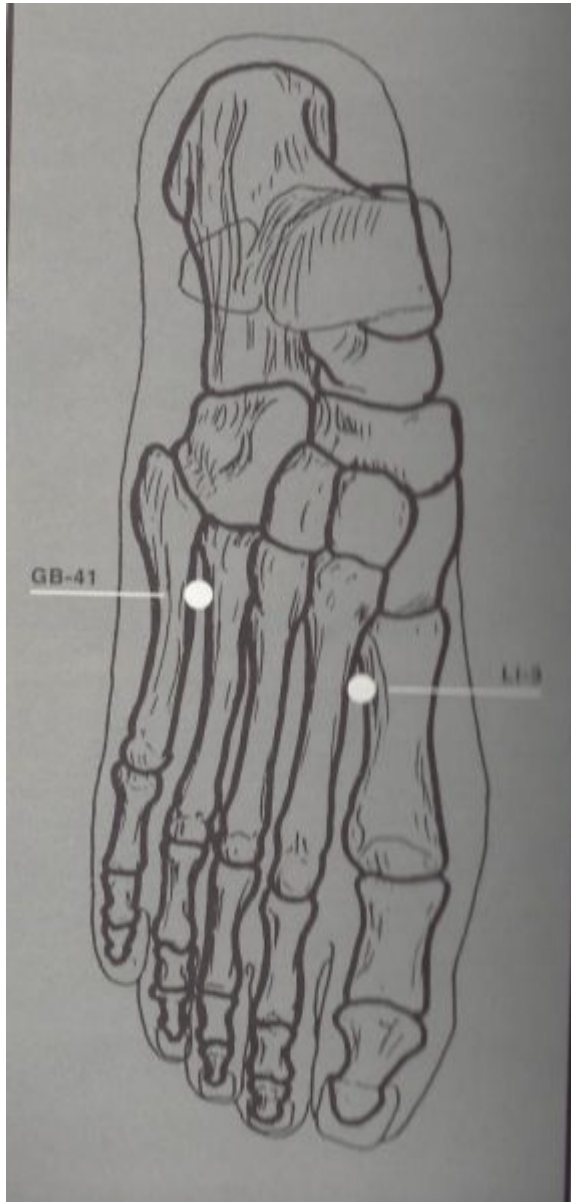
ANATOMY: A cutaneous branch of the saphenous nerve, and the tibial nerve.

METHOD: **Kick** this **point** from the inside with a rising motion to rob the leg of energy.

NOTE: SP-6 is named sanyinjiao, "the meeting of the three yins." At this point, the kidney and liver meridians cross the spleen meridian, forming an

intersection of the three leg yin meridians. SP-6 can function as a part of all three meridians; so it is commonly used to set-up other **points**.

GALL BLADDER #41: GB- 41



LOCATION: In the depression just in front of the merging of the fourth and fifth metatarsal bones. It is located just in front of the bulge of the top of the foot where the bones of the fourth and fifth toes connect.

ANATOMY: The dorsal digital nerve of the fourth metatarsus.

METHOD: Stomp this **point**. If an opponent is shoeless and **kicking**. GB-41 may also be struck with a single knuckle.

LIVER #3: Li-3

LOCATION: In the depression between the first and second metatarsals. This point can be found on the top of the foot, between the two bones leading to the first (big) and second toes.

ANATOMY: The peroneal nerve.

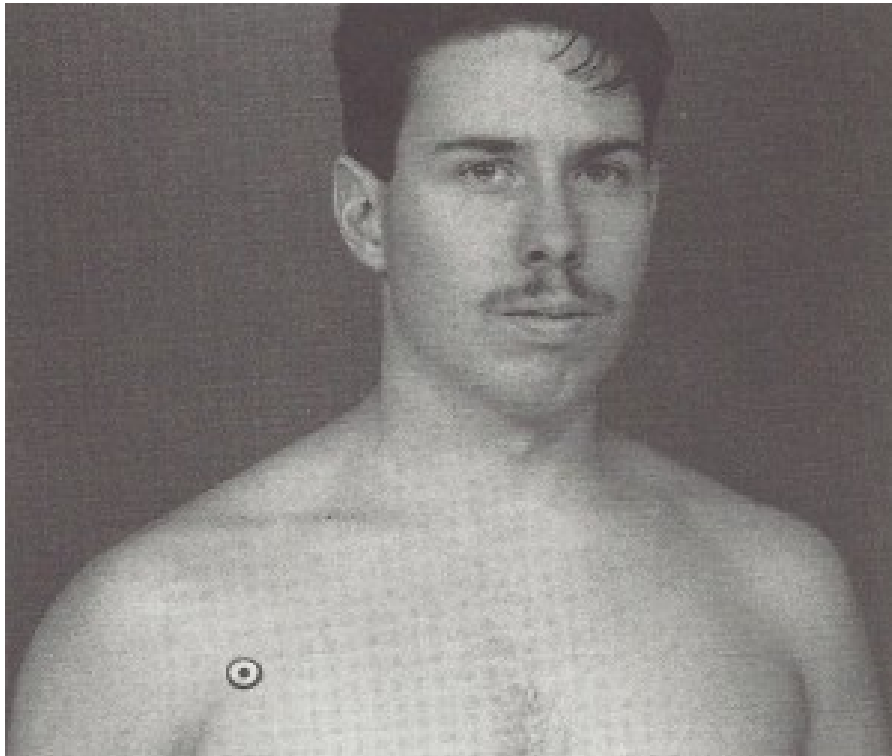
METHOD: Press or **strike** this point diagonally downward.

NOTE: Li-3 is best used when the opponents feet are unshod, or in lightweight shoes.

*Taken from THE DILLMAN METHOD OF PRESSURE POINT FIGHTING
by **George A. Dillman** with Chris Thomas (pages 125-132) and **Dillman**
Karate International

Points of the Torso

LUNG #1:L1



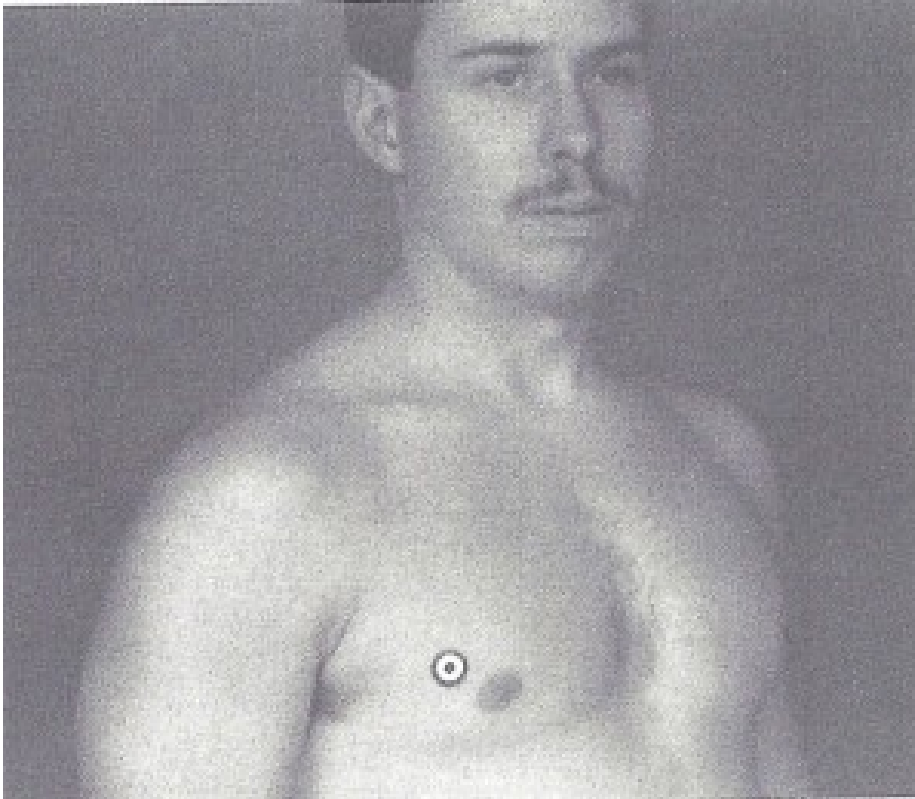
LOCATION: In the upper portion of the pectoralis muscle, about 1 inch below the lateral end of the clavicle in the first intercostal space. It is on a line about halfway between the axillary (armpit) and the top of the shoulder, on the curve of the upper chest near the meeting of the chest and shoulder.

ANATOMY: An intermediate branch of the supraclavicular nerve, a branch of the anterior thoracic nerve and the first intercostal nerve.

METHOD: **Strike** this **point** in a downward and inward direction to disrupt the respiratory system.

NOTE: L-1 is the alarm point for the lung meridian, which (from the point of view **Kyusho-jitsu**) makes it a particularly vulnerable point.

PERICARDIUM #1: P-1

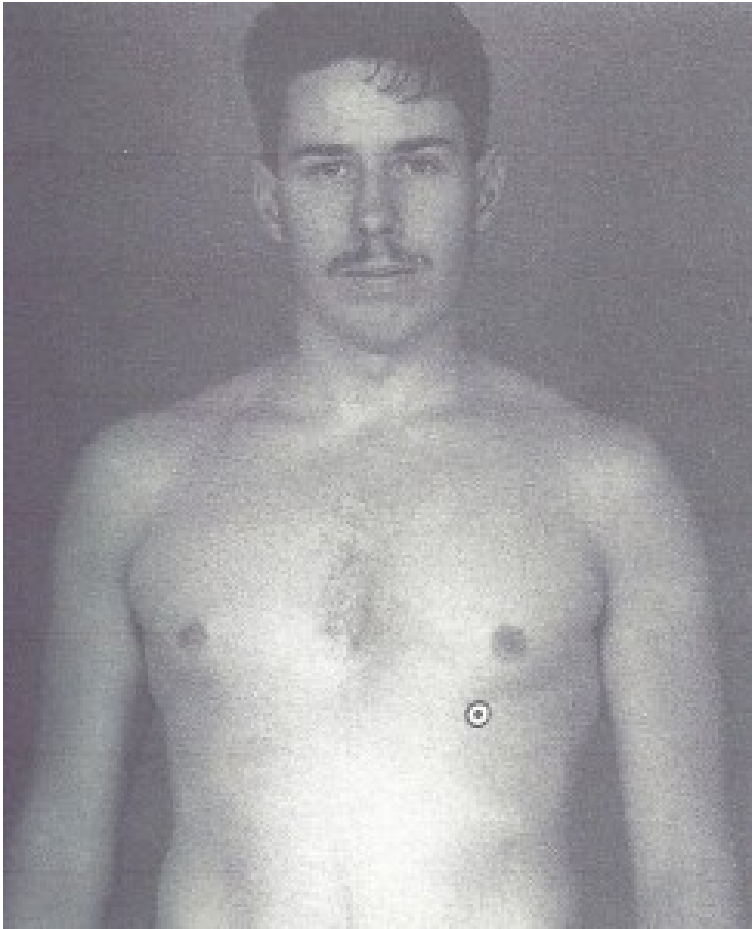


LOCATION: In the fourth intercostal space, 1 inch supralateral to the nipple. It is just to the outside and above the nipple in the space between the 4th and 5th ribs.

ANATOMY: The muscular branch of the anterior thoracic nerve and the 4th intercostal nerve.

METHOD: **Strike** this **point** on a line towards the center of the back.

STOMACH #18: S-18



LOCATION: Below the nipple in the fifth intercostal space, at the lower margin of the pectoralis muscle.

ANATOMY: The branch fifth intercostal nerve.

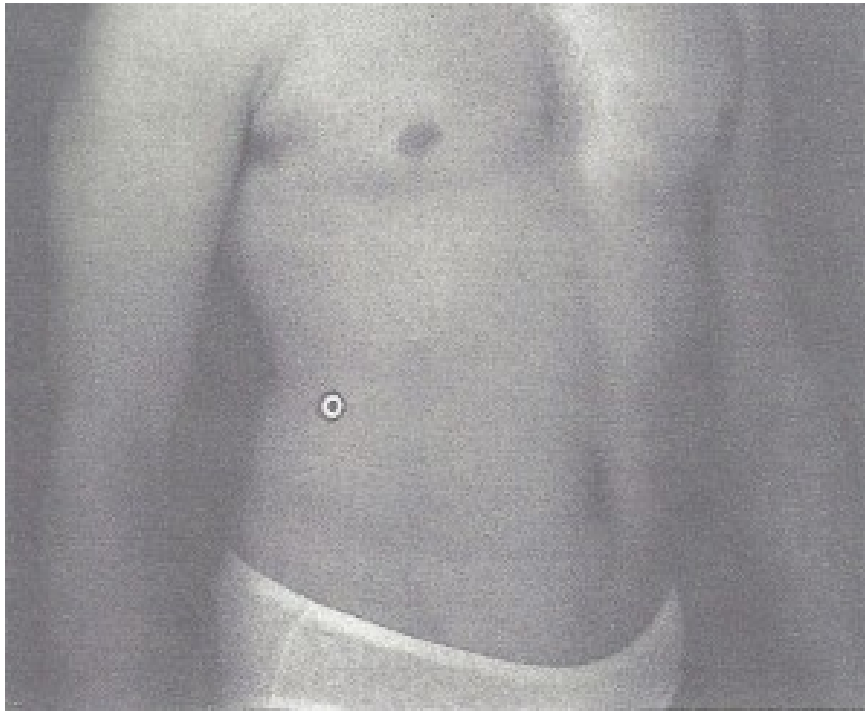
METHOD: **Punch** this **point** directly.

NOTE: The pectoralis muscle is a poor target because of its mass, particularly on body-builders. However, just below the muscle, at S-18, the body is vulnerable, especially on those who have stretched and lifted the nerves by over-developing the muscle. Further, S-18 is a point where an electrode is attached during a twelve-lead **EKG**.

RIB CAGE BORDER CLUSTER

At the border of the rib cage and abdomen are two points, Li-14 and GB-24, which work together very effectively. These two points are a common target for the lower hand in two-handed **techniques**.

LIVER #13: Li-13

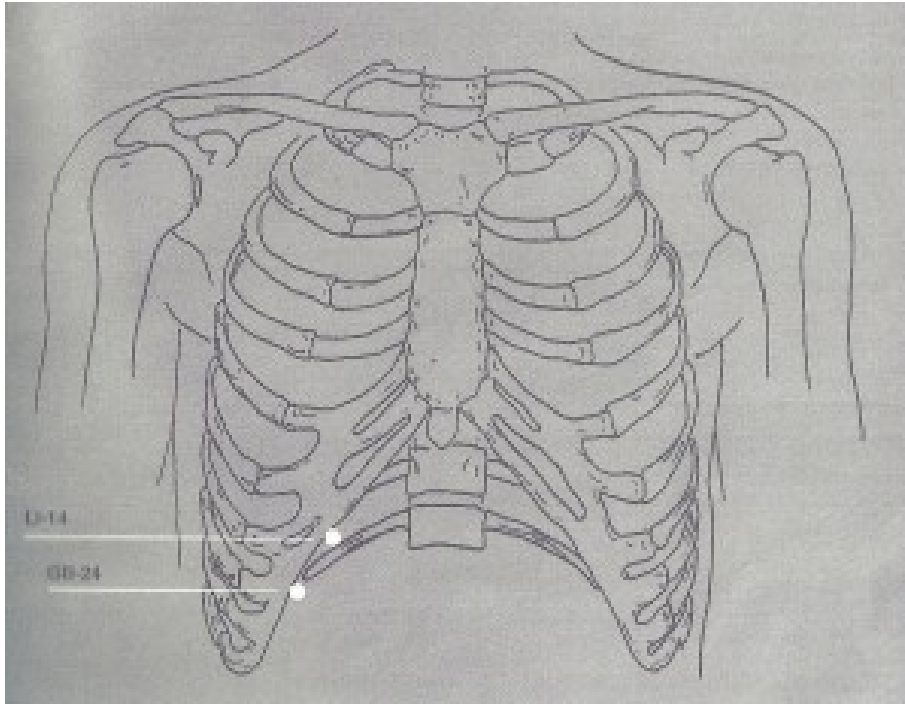


LOCATION: At the medial margin of the rib cage at the merging of the sixth and seventh costal cartilage.

ANATOMY: The sixth intercostal nerve.

NOTE: Li-14 is the alarm point for the liver meridian as well as a linking point between the liver and spleen meridians.

LIVER #14: LI-14 & GALL BLADDER #24: GB-24



LOCATION: At the medial margin of the rib cage at the merging of the seventh and eighth costal cartilage.

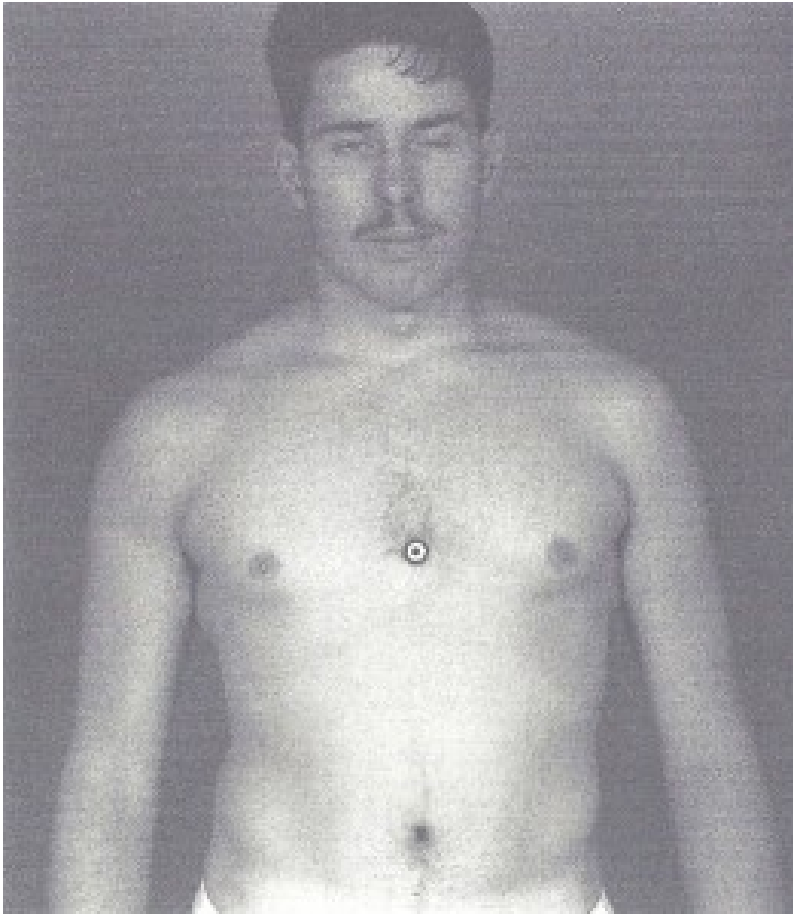
ANATOMY: The seventh intercostal nerve.

NOTE: This is the alarm point for the gallbladder meridian, as well as a linking point between the gallbladder and bladder meridians.

METHOD: **Strike** these points diagonally up and in.

NOTE: These points are particularly potent because a **strike** here affects both yin (liver and spleen) and yang (gallbladder and bladder) simultaneously.

CONCEPTION #17: CO-17



LOCATION: On the sternum, level with the nipples, and just above the articulations of the right and left fifth rib and the sternum.

ANATOMY: A medial anterior cutaneous branch of the fourth intercostal nerve.

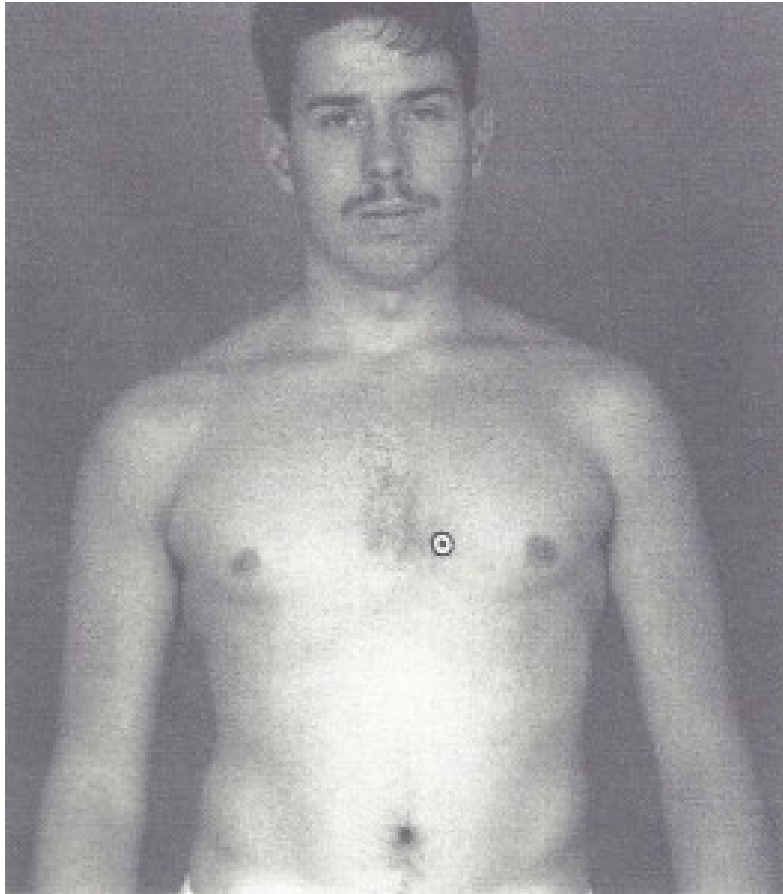
METHOD: **Punch** this point directly.

NOTE: This is the alarm point of the pericardium meridian, and the intersection point of the spleen, kidney, small intestine and triple warmer meridians on the conception channel. It is considered one of eight influential points dominating ki. It also lies directly over the heart.

WARNING

A blow to the sternum at this point can damage the heart!

KIDNEY #23: K-23



LOCATION: In the fourth intercostalspace, 2 inches lateral to the mid-line. This point is level with the nipples and Co- 17, just to either side of the sternum.

ANATOMY: FOURTH intercostal nerve, as well as an anterior cutaneous branch of the same.

METHOD: Strike this point directly, typically with a single-knuckle fist (ippon-ken).

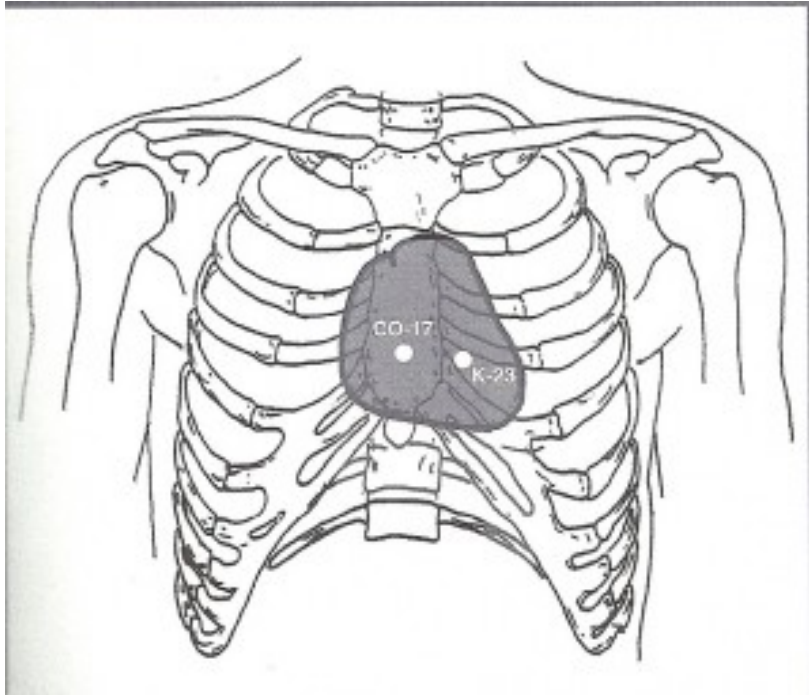
NOTE: On the left side this point lies directly over the heart.

WARNING

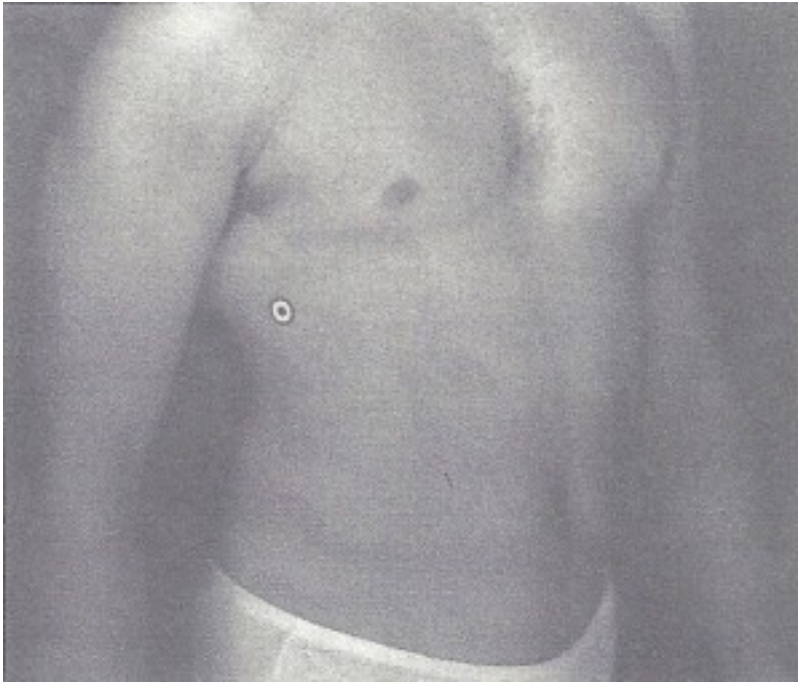
A blow to the sternum at this point can damage the heart!

**WARNING: KIDNEY #23: K-23 & CONCEPTION #17:
CO-17**

Do not strike these points in practice!



SPLEEN # 21: SP-21

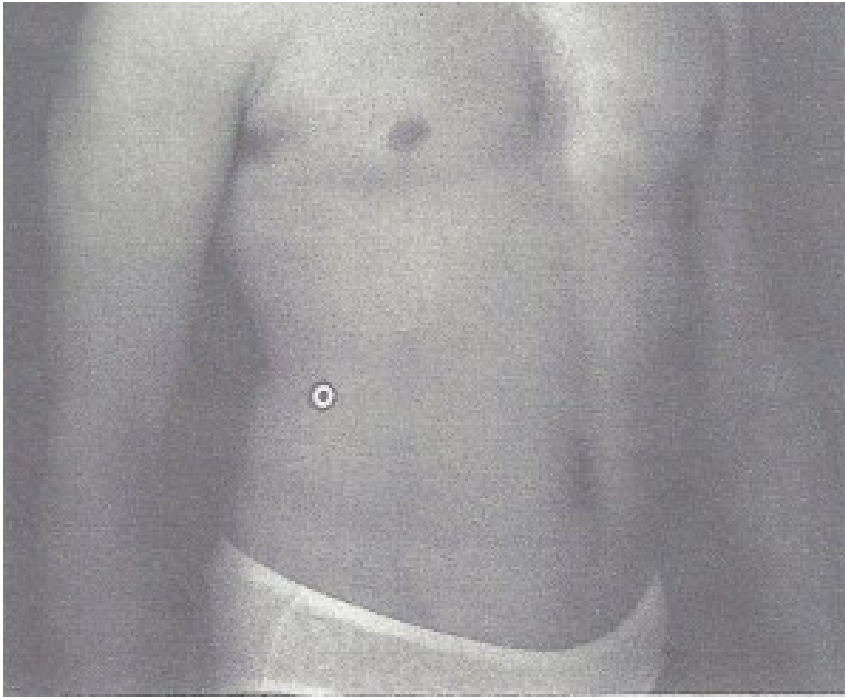


LOCATION: On the mid- axillary line, in the seventh intercostal space. This point can be found on the side of the body, midway between the center of the armpit and the free end of the eleventh (floating) rib.

ANATOMY: The seventh intercostal nerve and the terminal branch of the long thoracic nerve.

METHOD: **Strike** this point from the side towards the body-center.

LIVER #13: LI-13



LOCATION: In the internal and external oblique muscles at the anterior end of the eleventh rib. This point can be located at the free end of the longer of the two floating ribs, at about the place the elbow touches the side of the body.

ANATOMY: The tenth intercostal nerve.

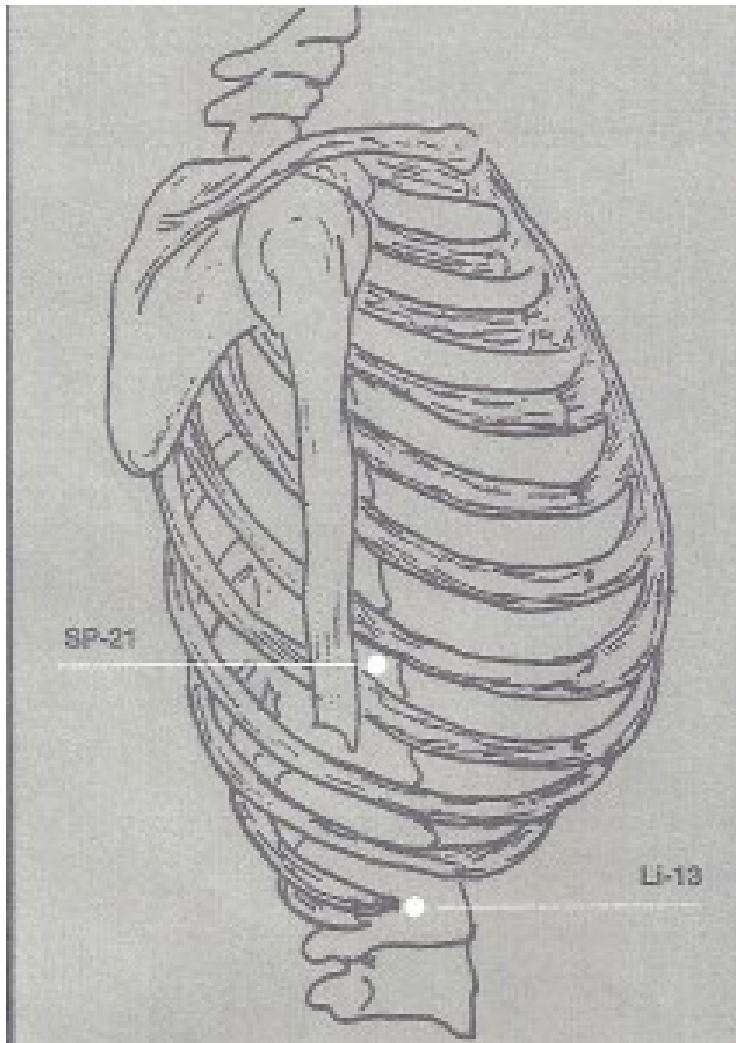
METHOD: **Strike** this point diagonally upward.

NOTE: LI-13 is the alarm point of the spleen meridian. This point contains an internal cycle of destruction as it relates to both the liver (wood) and spleen (earth) meridians.

WARNING

Do not strike this point in practice!

WARNING: SPLEEN #21: SP-21 & LIVER #13: LI-13
Do not strike this point in practice!



TANDEN CLUSTER

The tanden, or "**Ki**-center," is the source of intrinsic energy for the body. Along the center line, over the tanden are four important points. These points include the main tanden point (CO-6) as well as three "alarm" points.

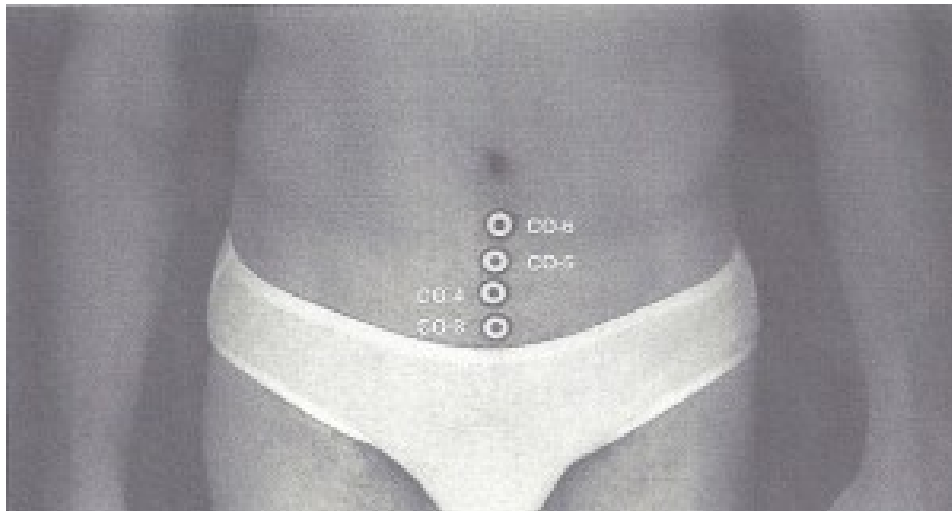
CONCEPTION #6: CO-6

LOCATION: 1.5 inches directly below the navel on the median line of the body.

ANATOMY: A medial anterior branch of the eleventh intercostal nerve.

NOTE: The oriental name for CO-6 is kikai, "Sea of Ki". This point is the ki center (tanden) of the body.

CONCEPTION #5: CO-5



LOCATION: 2 inches directly below the navel.

ANATOMY: A medial anterior cutaneous branch of the intercostal nerve.

NOTE: CO-5 is the alarm point for the triple warmer meridian.

CONCEPTION #4: CO-4

LOCATION: 3 inches directly below the navel.

ANATOMY: A medial anterior cutaneous branch of the intercostal nerve.

NOTE: CO-4 is the alarm point of the small intestine meridian.

CONCEPTION #3: CO-3

LOCATION:

ANATOMY: A branch of the iliohypogastric nerve.

NOTE: CO-3 is the alarm point of the bladder meridian. It is also the point at which the three leg yin meridians (kidney, spleen, and liver) intersect on the conception meridian.

METHOD: **Strike** these points either diagonally downward or diagonally upward to incapacitate an opponent.

CAUTION

Three classics of Chinese acupuncture - "*The Great Compendium*," "**Bronze Statue**," and "**The Glorious Anthology of Acupuncture**" - state the CO-5 should not be needled on women or they will be "rendered incapable of bearing children for life" (*Fundamentals of Chinese Acupuncture*). For this reason, we advise that techniques directed against the tanden collection of points only be indicated in practice with women.

*Taken from *Advanced Pressure Point Fighting of Ryukyu Kempo* by **George A. Dillman** with Chris Thomas (pp.116-123) and **Dillman Karate International**

Points of the Head and Neck

STOMACH #5



The stomach meridian has two descending branches on the face, one from the temple area, and the other from under the eye. These branches intersect at S-5, which is located at the notch along the bottom of the jaw bone. Through this notch passes the facial artery; and over it lies the Marginal Mandibular branch of the Seventh Cranial (or Facial) nerve. This point is struck diagonally upward, towards the center of the skull.

STOMACH #9

TS-9 lies on the side of the neck at the meeting of the neck at the anterior border of the Sternocleidomastoid muscle and the thyroid cartilage. It is level with the Adam's apple in the crease between the larynx and the muscle. This point is struck at a 45 degree angle, with a "heavy" (not snapping) blow.

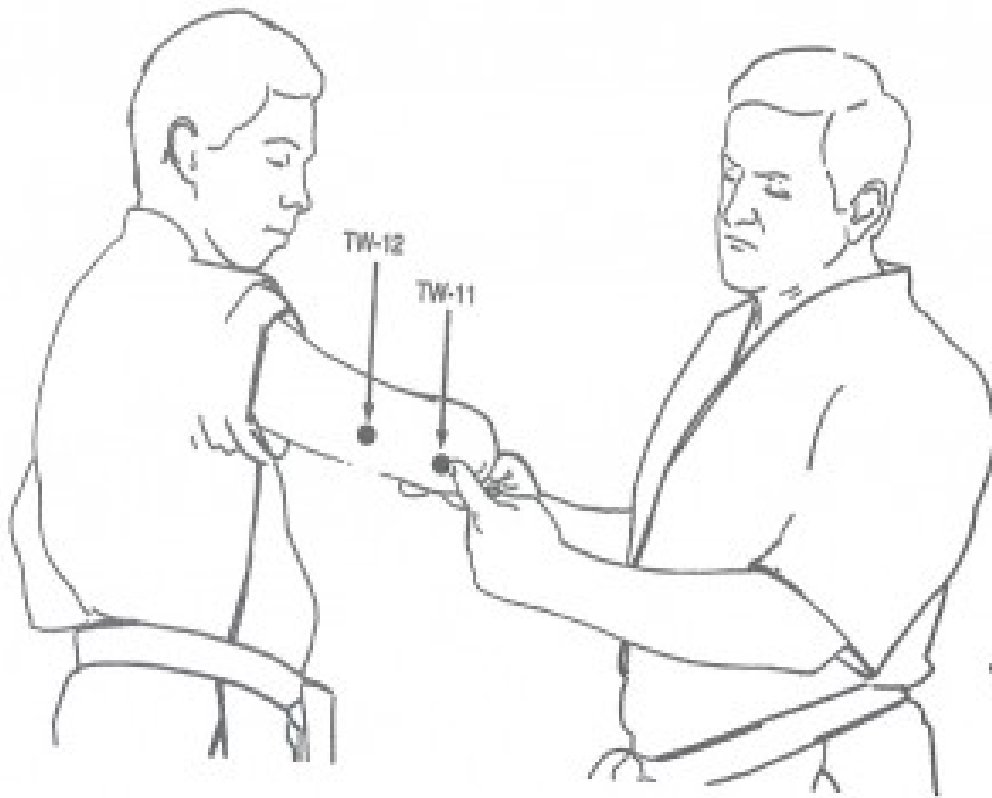
TRIPLE WARMER #17

TTW-17 is located under the ear, behind the hinge of the jaw, at the place where the Seventh Cranial (or Facial) nerve surfaces. This point is struck at a 45 degree angle from back to front.

*Taken from THE DILLMAN METHOD OF PRESSURE POINT FIGHTING
by **George A. Dillman** with Chris Thomas (pages 75,76,77) and **Dillman**
Karate International

Points of the Back of the Arm

TRIPLE WARMER # 11



This is a knead-point one inch above the elbow. It lies over the tendon which connects the triceps to the elbow joint. At the point where a nerve connects to a tendon lies a collection of nerve cells and tendon cells which monitor the condition of the joint. This nerve/tendon cluster is called a "body of Golgis". Stimulating this point causes the muscles of the elbow and shoulder to reflexively relax, allowing the joint to be easily locked.

TRIPLE WARMER # 12

This is a hit-point located directly in the middle of the triceps. A strike against this point while grasping the wrist will lock out the arm and shoulder, knocking an opponent to the ground.

Though everyone has these pressure points, not everyone is equally susceptible on every point. Individuals with powerful forearms are resistant to blows against LI-10 and L-5. People of African descent are resistant to blows against TW-12. However, even when there is resistance to the technique applied at one of these points, it can still be used to set-up a corresponding point elsewhere. And, if any point is resistant, the next point up is usually very sensitive. For example, individuals resistant at L-5 will generally respond well to a strike against LI-13.

*Taken from "The Dillman Method of Pressure Point Fighting" By **George Dillman** with Chris Thomas. Pages 71, 72, and 73 and **Dillman Karate International**

Points of the Outside of the Arm

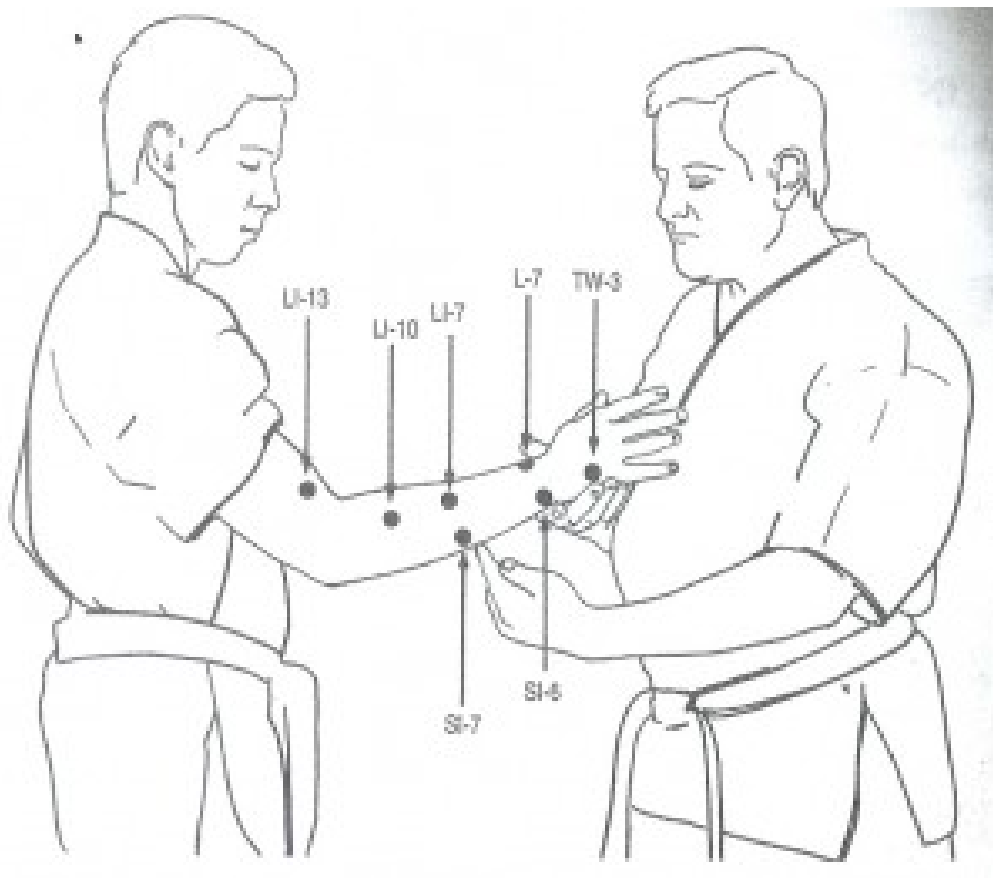
TRIPLE WARMER #3

This is a push-point, located on the back of the hand between the bones of the fourth and fifth fingers, one-third the distance from the knuckles to the wrist. This point is used in joint manipulation techniques against the wrist. Because the smaller bones of the hand are delicate, this can also be a hit-point.

NOTE: The triple warmer meridian is associated with the thyroid, an organ unknown to the ancient Chinese.

SMALL INTESTINE #6

This push-point is located on the outside of the arm (opposite H-6). It is at the base of the styloid process of the ulna at a dorsal branch of the ulnar nerve.



LUNG #7

This point lies directly on the top of the radius, about 1/2" up from L-8. It responds to a rub and loosens the fist. When grabbing the wrist, this point must be manipulated towards the outside of the radial bone.

LARGE INTESTINE #7

This point lies on the outside of the radius, about the middle of the forearm. It is located opposite to L-6. It is at the end of the extensor capri radialis brevis muscle.

SMALL INSTINE #7

This point is located on the outside of the ulna about midway along the forearm opposite to the Lower Mid-forearm point (M-UE-28). Strike this point to release and bend the wrist.

LARGE INTESTINE #10

This is a hit-point located between the radiobrachialis and the extensor carpi radialis longus, on a branch of the radial nerve. It is approximately one inch down from the elbow joint on the outside of the forearm. Striking this point will produce numbness in the arm, and cause an opponent's head to come forward, exposing head and neck points to follow-up attack.

LARGE INTESTINE #13

This a hit-point located two inches above the crease of the elbow in the hollow on the outside of the biceps. Attack this point in and towards the body to bend the elbow and release the hand. LI-13 responds best to a strike, but may also be pressed.

*THE DILLMAN METHOD OF PRESSURE POINT FIGHTING by [George A Dillman](#) with Chris Thomas (pages 60-64) and [Dillman Karate International](#)

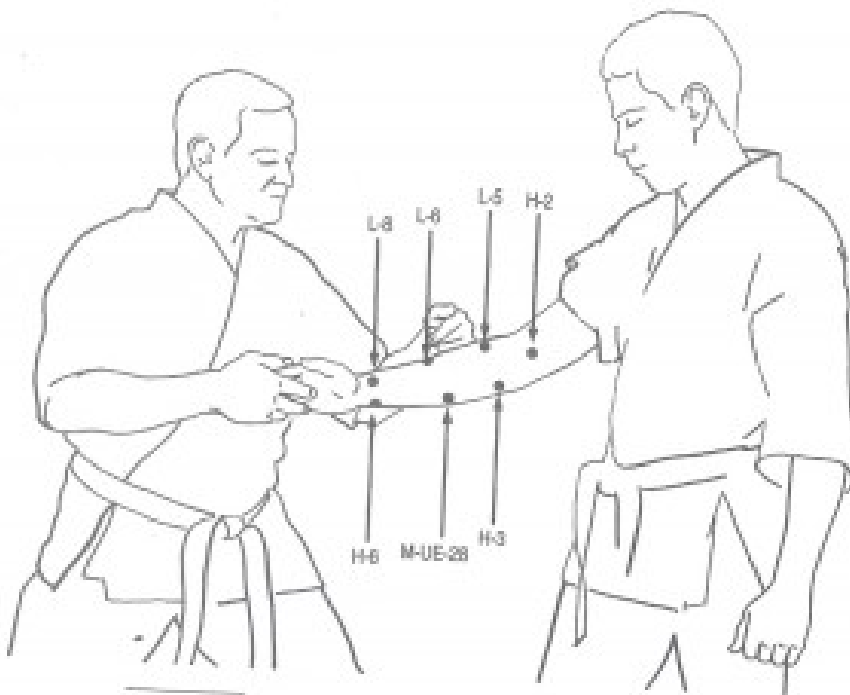
Points of the Inside of the Arm

HEART #6

This is a touch-point located on the little finger side of the wrist, 1/2 inch from the wrist joint. It lies slightly toward the inside of the ulnar bone along the line of the ulnar nerve. This point controls energy to the wrist, and pressing it with weaken the wrist, making it easier to bend.

LUNG #8

This point is located on the thumb side of the wrist, directly up from H-6. It is a push point lying over the radial nerve and against the radius. This point controls the making of a fist. Catching this point while blocking can cause the fist to give way, greatly reducing its ability to transfer energy should the technique strike.



LOWER MID-FOREARM POINT

This point lies on the heart meridian, about midway along the inner aspect of the ulna, directly down from L-6. In acupuncture this is an "extraordinary

point," sometimes designated as M-UE-28. It is a hit-point and controls the wrist.

LUNG #6

This point is located at the end of the radiolbrachialis muscle (the muscle on the thumb side of the forearm) along the inside of the arm. The length of the radiolbrachialis varies among different people , so the location of this point can vary, but it is approximately in the mid-point of the forearm. This is a hit-point which controls the fist.

LUNG #5

This hit-point is located inside the forearm next to the radiobrachialis, about one inch down from the crease of the elbow. Striking this point will cause the knees to buckle, exposing the opposite leg to attack. In most individuals, striking this point while holding the wrist points will put the opponent on the ground.

HEART #3

H-3 is just below the knob of the elbow on the inside of the arm. It may be struck or firmly pressed to bend the elbow.

HEART #2

H-2 is located on the inside of the arm, above the knob of the elbow. H-2 actually represents both a specific point, and the area above the elbow on the inside of the triceps along the ulnar nerve and brachial artery (in fact, some acupuncture texts specify two points, designated H-2A & H-2B). A strike to this area can cause the arm to bend and the fingers to curl inward.

****KYUSHO-JITSU: The Dillman Method of Pressure Point Fighting" by George A. Dillman**with Chris Thomas Pages 60-64 and **Dillman Karate International**